Case 16-03463-jw Doc 9 Filed 07/22/16 Entered 07/22/16 11:14:22 Desc Main Document Page 1 of 37

Fill in this infor	mation to identify your	case:	./	
Debtor 1	Emma Cleveland	Pou		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
Case number	16-03463			
(if known)				☐ Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new Summary and check the box at the top of this page.		•
Par	11: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	25,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	44,400.00
Par	12: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	108,505.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	27,289.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	2,202.43
	Your total liabilities	\$	137,996.43
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,478.92
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,583.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	l, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	27,289.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	27,289.00

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Fill in this info	ormation to identify	your case and th		cument	Page 3 of 37			
				,				
Debtor 1	Emma Cleve		e Name		Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name		Last Name			
United States B	Sankruptcy Court for	the: DISTRICT	OF SOL	JTH CAROLII	NA			
Case number	16-03463				_			Check if this is an amended filing
Official F	orm 106A/B							
Schedu	ıle A/B: Pr	operty						12/15
Part 1: Describ 1. Do you own o	ore space is needed, a lestion. De Each Residence, But or have any legal or equal 2.	ttach a separate sh	heet to tl	his form. On th	e are filing together, both are le top of any additional pages wn or Have an Interest In , land, or similar property?			
1.1 283 West End Drive Street address, if available, or other description		ription	What	Single-family Duplex or mu	y? Check all that apply home Iti-unit building n or cooperative	the amount of	of any secured o	ns or exemptions. Put claims on <i>Schedule D:</i> Secured by Property.
Moncks	Corner SC	29461-0000	•	Manufactured Land	l or mobile home	Current valu		Current value of the portion you own?
City	State	ZIP Code	Who		t in the property? Check one	Describe the	simple, tenan , if known.	\$25,000.00 If ownership interest cy by the entireties, or
Berkeley	v		■	Debtor 1 only Debtor 2 only		ree simple	ie	
County				At least one o	of the debtors and another ou wish to add about this item	(see instr	uctions)	unity property
			TMS Deb	8 # 141-08-0 tor believes	9 Bell 56 x 32 mobile h 0-045 s the marketable value 2 interest with mother,	to be \$50,00		
					from Part 1, including any		>	\$25,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

De	btor 1 F	mma Cleveland	l Pou	Document Page 4	of 37 Case number (if known) 16-	03463
3 (nicles, motorcycles	,	, <u></u>	33.133
_	_	, il dono, il dotoro,	oport utility vo	motos, motor dydiod			
_	⊒ No ■ xz						
	Yes						
3.	1 Make:	Lincoln		Who has an interest in the preparty? Ch	Do not d	leduct secured c	laims or exemptions. Put
Э.	Model:	MKZ		Who has an interest in the property? Che Debtor 1 only	the amo		ed claims on Schedule D: ims Secured by Property.
	Year:	2012		Debtor 1 only Debtor 2 only			
		nate mileage:	62,646	Debtor 1 and Debtor 2 only		value of the roperty?	Current value of the portion you own?
		formation:		At least one of the debtors and another	•		
	VIN#3I	NHL2GC6CR82	29077			•	*
		on: 102 Hill Cou s Corner SC 29		☐ Check if this is community property (see instructions)	<u> </u>	\$13,900.00	\$13,900.00
Par Do	t 3: Descri	have attached for	r Part 2. Write to the stand Household Ite or equitable into the standard s	n for all of your entries from Part 2, inches hat number here		=>	\$13,900.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
[Examples: □ No ■ Yes. De		furniture, linens,	china, kitchenware			
				ds and furnishings ill Court, Moncks Corner SC 2946	1		\$2,500.00
		Be	droom Furnit	ure			
		Loc	cation: 102 H	III Court, Moncks Corner SC 2946	1		\$1,500.00
I		Televisions and radincluding cell phonescribe	es, cameras, m	eo, stereo, and digital equipment; compu edia players, games electronics ill Court, Moncks Corner SC 2946		music collecti	ons; electronic devices
			Janoii. 102 II	iii Court, Monore Conner SC 2540			
i		Antiques and figuri other collections, r		orints, or other artwork; books, pictures, or lectibles	or other art objects; star	mp, coin, or ba	seball card collections;

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Official Form 106A/B Schedule A/B: Property page 2

Case 16-03463-jw Doc 9 Filed 07/22/16 Entered 07/22/16 11:14:22 Desc Main Page 5 of 37 Document Debtor 1 Case number (if known) 16-03463 **Emma Cleveland Pou** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Wearing apparel \$500.00 Location: 102 Hill Court, Moncks Corner SC 29461 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Miscellaneous jewelry \$800.00 Location: 102 Hill Court, Moncks Corner SC 29461 Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5.500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes.....

Official Form 106A/B Schedule A/B: Property page 3

filing

Woodforest Bank - zero balance at time of

17.1. Checking

\$0.00

Case 16-03463-jw Doc 9 Filed 07/22/16 Entered 07/22/16 11:14:22 Desc Main Document Page 6 of 37 Debtor 1 Case number (if known) 16-03463 **Emma Cleveland Pou** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. Utility Santee Cooper security deposit of \$200 - no \$0.00 market value 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

ъ.		5 61 15	Document	Page 7 of 37		2 20 400
De	ebtor 1	Emma Cleveland Pou		Case	number (if known) 16	5-03463
	Tax ref ■ No	unds owed to you				
		Give specific information about them, inc	cluding whether you alre	ady filed the returns and the	tax years	
	Examp ■ No	support les: Past due or lump sum alimony, spo Give specific information	usal support, child suppo	ort, maintenance, divorce se	ttlement, property set	tlement
	Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurance benefits; unpaid loans you made to Give specific information		efits, sick pay, vacation pay	, workers' compensat	tion, Social Security
		ts in insurance policies ples: Health, disability, or life insurance; h	nealth savings account (HSA); credit, homeowner's,	or renter's insurance	
	Yes.	Name the insurance company of each p Company name:	olicy and list its value.	Beneficiary:		Surrender or refund value:
		Life insurance cash / surrende	through employer - er value	no		\$0.0
33.	■ No □ Yes. Claims Examp	ne has died. Give specific information against third parties, whether or not of les: Accidents, employment disputes, in Describe each claim			ayment	
	Other o	contingent and unliquidated claims of	every nature, includin	g counterclaims of the del	btor and rights to se	t off claims
	☐ Yes.	Describe each claim				
	■ No	ancial assets you did not already list Give specific information				
36		he dollar value of all of your entries fr rrt 4. Write that number here				\$0.00
Pa	rt 5: Des	scribe Any Business-Related Property You	Own or Have an Interest	n. List any real estate in Part	1.	
•	No. Go	own or have any legal or equitable interest to Part 6. so to line 38.	in any business-related p	operty?		
Pa		scribe Any Farm- and Commercial Fishing- ou own or have an interest in farmland, list it in		n or Have an Interest In.		
46.	Do you	own or have any legal or equitable in	nterest in any farm- or o	commercial fishing-related	d property?	

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Official Form 106A/B Schedule A/B: Property page 5

No. Go to Part 7.

Case 16-03463-jw Doc 9 Filed 07/22/16 Entered 07/22/16 11:14:22 Desc Main Page 8 of 37 Document Debtor 1 Case number (if known) 16-03463 **Emma Cleveland Pou** ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$25,000.00 Part 2: Total vehicles, line 5 \$13,900.00 Part 3: Total personal and household items, line 15 \$5,500.00 Part 4: Total financial assets, line 36 58. \$0.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$19,400.00 Copy personal property total \$19,400.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$44,400.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:		
Debtor 1	Emma Cleveland	Pou		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (CAROLINA	
Case number	16-03463			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement ex to

exe	ds—may be unlimited in dollar amount. Ho emption to a particular dollar amount and the he applicable statutory amount.	, ,		•								
Pa	rt 1: Identify the Property You Claim as	Exempt										
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yc	our spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)											
	☐ You are claiming federal exemptions. 11	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)										
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.											
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption							
		Copy the value from Schedule A/B	Check only one box for each exemption.									
	Household goods and furnishings Location: 102 Hill Court, Moncks	\$2,500.00		\$2,500.00	S.C. Code Ann. § 15-41-30(A)(3)							
	Corner SC 29461 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)							
	Miscellaneous electronics Location: 102 Hill Court, Moncks	\$200.00		\$200.00	S.C. Code Ann. § 15-41-30(A)(3)							
	Corner SC 29461 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	13-41-30(A)(3)							
	Wearing apparel Location: 102 Hill Court, Moncks	\$500.00		\$500.00	S.C. Code Ann. § 15-41-30(A)(3)							
	Corner SC 29461 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	(, , ,							
	Miscellaneous jewelry Location: 102 Hill Court, Moncks	\$800.00	-	\$800.00	S.C. Code Ann. § 15-41-30(A)(4)							
	Corner SC 29461 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit								

3.	Are	you claiming	a homestead	exemption of	more than	\$160,375?
----	-----	--------------	-------------	--------------	-----------	------------

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No

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Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463

☐ Yes

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		Docume	nt Page 11 of 37	
Fill in this infor	mation to identify your	case:		
Debtor 1	Emma Cleveland	Pou		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA	
Case number	16-03463			
(if known)				Check if this is an amended filing
Official For	m 106D			
Schedule	D: Creditors	Who Have Clai	ms Secured by Property	12/15

Case number 16-03463				
(if known)			_	k if this is an Ided filing
			amei	ded ming
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
	If two married people are filing together, both are e out, number the entries, and attach it to this form. (
1. Do any creditors have claims secured by	y your property?			
\square No. Check this box and submit t	his form to the court with your other schedules. \	You have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separate	Column A ly	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 CitiFinancial Servicing	Describe the property that secures the claim:	\$55,810.00	\$50,000.00	\$0.00
Creditor's Name	283 West End Drive Moncks Corner, SC 29461 Berkeley County 1 acre with 1999 Bell 56 x 32 mobile home TMS # 141-08-00-045 Debtor believes the marketable value to be \$50,000 Debtor has a 1/2 interest with mother, Caroline Cleveland			
POB 6043	As of the date you file, the claim is: Check all that apply.			
Sioux Falls, SD 57117	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secar loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.2 CitiFinancial Servicing LLC	Describe the property that secures the claim:	\$15,000.00	\$50,000.00	\$15,000.00

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Debtor 1 Emma Cleveland Pou		Case number (if know)	16-03463	
First Name Middle N	lame Last Name			
POB 6043 Sioux Falls, SD 57117	283 West End Drive Moncks Corner, SC 29461 Berkeley County 1 acre with 1999 Bell 56 x 32 mobile home TMS # 141-08-00-045 Debtor believes the marketable value to be \$50,000 Debtor has a 1/2 interest with mother, Caroline Cleveland As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Second I	Mortgage		
Date debt was incurred	Last 4 digits of account number			
2.3 Credit Central	Describe the property that secures the claim:	\$1,164.00	\$0.00	\$1,164.00
Creditor's Name	Household goods - lien to be avoided			
113 S Hwy 52 Ste E Moncks Corner, SC 29461	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Non-Pure	chase Money Security		
Date debt was incurred	Last 4 digits of account number			
2.4 Credit Central	Describe the property that secures the claim:	\$520.00	\$0.00	\$520.00
Creditor's Name	Household goods - lien to be avoided			
113 S Hwy 52 Ste E Moncks Corner, SC 29461 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	I		
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Non-Pure	chase Money Security		
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor 1 Emma Cleveland Pou		Case number (if know)	16-03463	
First Name Middle N	Name Last Name			
2.5 First Franklin Financial	Describe the property that secures the claim:	\$4,300.00	\$1,500.00	\$2,800.00
Creditor's Name 8988 University Blvd. Ste	Bedroom Furniture Location: 102 Hill Court, Moncks Corner SC 29461			
106	As of the date you file, the claim is: Check all that	•		
Charleston, SC 29406	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	U Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.6 First Franklin Financial	Describe the property that secures the claim:	\$392.00	\$0.00	\$392.00
Creditor's Name	Household goods - lien to be avoided			
8988 University Blvd. Ste	As of the date you file, the claim is: Check all that			
106	apply.			
Charleston, SC 29406	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or :	secured		
Debtor 2 only	car loan)	oodarod		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Non-Pure	chase Money Security		
Date debt was incurred	Last 4 digits of account number			
2.7 Lendmark Financial				
Services	Describe the property that secures the claim:	\$1,169.00	\$0.00	\$1,169.00
Creditor's Name	Household goods - lien to be avoided			
1216 N. Main Street Ste E	As of the date you file, the claim is: Check all that	J		
Summerville, SC 29483	apply.			
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street, Oity, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	chase Money Security		
Date debt was incurred	Last 4 digits of account number			
2.8 One Main Financial	Describe the property that secures the claim:	\$7,609.00	\$0.00	\$7,609.00

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Deb	tor 1 Emma Cleveland Pou			Case number (if know)	16-03463	
	First Name Middle N	ame Last Name				
	Creditor's Name	Household goods - lien to b		1		
		avoided	<i>,</i>			
	Bankruptcy Dept					
	PO Box 140069	As of the date you file, the claim is: apply.				
	Irving, TX 75014-0069	☐ Contingent				
	Number, Street, City, State & Zip Code	Unliquidated				
\A/l= =	s awar tha dahta Obereli erre	☐ Disputed Nature of lien. Check all that apply.				
_	o owes the debt? Check one.	☐ An agreement you made (such as		a a cura d		
_	Debtor 1 only	car loan)	mortgage or	secured		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	ohonio'a lion\			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit	crianic s nem			
_	Check if this claim relates to a	Other (including a right to offset)	Non-Pur	chase Money Security		
	community debt	— Other (including a right to onset)				
Date	debt was incurred	Last 4 digits of account num	nber			
	1					
2.9	Regional Acceptance Corporation	Describe the property that secures	the claim:	\$18,251.00	\$13,900.00	\$4,351.00
	Creditor's Name	2012 Lincoln MKZ 62,646 m		1	 	
		VIN#3LNHL2GC6CR829077				
		Location: 102 Hill Court, Mo	oncks			
	1424 East Fire Tower	Corner SC 29461 As of the date you file, the claim is:				
	Road	apply.	Check all that			
	Greenville, NC 27858	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one. Disputed Nature of lien. Check all that apply.						
_	Debtor 1 only	An agreement you made (such as		· · · · · · · · ·		
_	Debtor 2 only	car loan)	mortgage or	secured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
	Check if this claim relates to a community debt	Other (including a right to offset)				
Date	debt was incurred	Last 4 digits of account num	nber			
2.1	Springleaf Financial					
0	Services	Describe the property that secures	the claim:	\$4,290.00	\$0.00	\$4,290.00
	Creditor's Name	Household goods - lien to k avoided	e			
	975 Bacons Bridge Road	As of the date you file, the claim is:	Check all that			
	Unit 108	apply.	Check all that			
	Summerville, SC 29485	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
	Pebtor 1 only	☐ An agreement you made (such as	mortgage or	secured		
_	Debtor 2 only	car loan)				
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	at least one of the debtors and another	☐ Judgment lien from a lawsuit				
	Check if this claim relates to a community debt	Other (including a right to offset)	Non-Pur	chase Money Security		
Date	debt was incurred	Last 4 digits of account num	nber			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$108,505.00

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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Debtor	1 Emma Cleve	land Pou		Case number (if know)	16-03463
	First Name	Middle Name	Last Name		
	is the last page of y that number here:	our form, add the dollar va	llue totals from all pages.	\$108,505	.00
Part 2:	List Others to E	Be Notified for a Debt Th	nat You Already Listed		
trying t than on	o collect from you fo ne creditor for any of	or a debt you owe to some	one else, list the creditor in Part	1, and then list the collection age	or example, if a collection agency is ncy here. Similarly, if you have more tional persons to be notified for any
	Name, Number, Stree One Main Finan	et, City, State & Zip Code		On which line in Part 1 did you ente	er the creditor? 2.8
	975 Bacons Brid Summerville, SC	dge Rd Suite 162 C 29485		Last 4 digits of account number	-
•	T Lowndes Pope	t, City, State & Zip Code e Esquire		On which line in Part 1 did you ente	er the creditor? 2.1
-	PO Box 11412 Columbia, SC 29	9211		Last 4 digits of account number	-

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		Docume	nt Page 16	of 37		
Fill in this in	nformation to identify your o	case:				
Debtor 1	Emma Cleveland	Pou				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)) First Name	Middle Name	Last Name			
(Opodoo II, IIII19,	, instrume					
United State	s Bankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA			
Case number	er 16-03463					
(if known)					☐ Check	if this is an
					amend	led filing
Official E	orm 106E/F					
	e E/F: Creditors W	ho Havo Uneoci	ırad Claime			12/15
	te and accurate as possible. Use			rt 2 for anoditors with NON	DDIODITY alaima Li	
Schedule D: Cleft. Attach the	Executory Contracts and Unexpi Creditors Who Have Claims Sect of Continuation Page to this pag of number (if known).	red by Property. If more sp	ace is needed, copy the	e Part you need, fill it out,	number the entries i	n the boxes on the
Part 1: Li	ist All of Your PRIORITY Un	secured Claims				
1. Do any c	reditors have priority unsecured	d claims against you?				
☐ No. G	o to Part 2.					
Yes.						
identify wl possible,	f your priority unsecured claims hat type of claim it is. If a claim ha list the claims in alphabetical orde more than one creditor holds a pa	s both priority and nonpriority r according to the creditor's n	amounts, list that claim hame. If you have more th	nere and show both priority a	nd nonpriority amoun	ts. As much as
(For an ex	xplanation of each type of claim, s	ee the instructions for this for	m in the instruction bookle			
				Total claim	Priority amount	Nonpriority amount
2.1 Inte	ernal Revenue Service	Last 4 digits of	account number	\$18,696.00	\$18,696.00	\$0.00
	ity Creditor's Name				· · · · · · · · · · · · · · · · · · ·	i
	5 Assembly Street p MDP 39	When was the	debt incurred?		-	
	umbia, SC 29201					
	ber Street City State Zlp Code	As of the date	you file, the claim is: Ch	neck all that apply		
Who inc	curred the debt? Check one.	☐ Contingent				
■ Debt	or 1 only	☐ Unliquidated				
☐ Debt	or 2 only	☐ Disputed				
☐ Debt	or 1 and Debtor 2 only	Type of PRIOR	ITY unsecured claim:			
☐ At lea	ast one of the debtors and anothe	r Domestic su	pport obligations			

■ Taxes and certain other debts you owe the government

☐ Other. Specify

 $\hfill \square$ Claims for death or personal injury while you were intoxicated

 $\hfill\square$ Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

2011, 2012, 2013, 2014, and 2015 income taxes

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Debic	Emma Cieveland Pou	Case number (if know)	
2.2	R Michael Drose	Last 4 digits of account number \$2,650.00 \$2,65	50.00 \$0.00
	Priority Creditor's Name 3955 Faber Place Drive Suite 103	When was the debt incurred?	
	North Charleston, SC 29405 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
1	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	·	
	_	☐ Disputed Type of PRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only	Domestic support obligations	
_	At least one of the debtors and another	_	
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
_	s the claim subject to offset?	Claims for death or personal injury while you were intoxicated	
	■ No □ Yes	Other. Specify Attorney fees	
	in tes	Attorney rees	
2.3	SC Department of Revenue Priority Creditor's Name	Last 4 digits of account number \$5,943.00 \$5,94	43.00 \$0.00
	PO Box 12265 Columbia, SC 29211	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
١	Who incurred the debt? Check one.	☐ Contingent	
I	Debtor 1 only	□ Unliquidated	
ı	Debtor 2 only	□ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Domestic support obligations	
_	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
	s the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
	No	Other. Specify	
	☐ Yes	2011, 2012, 2013, 2014, and 2015 income taxes	 ;
Part 2	List All of Your NONPRIORITY Unsecu	red Claims	
3. D	o any creditors have nonpriority unsecured claim	s against you?	
	No. You have nothing to report in this part. Submit t	this form to the court with your other schedules.	
	Yes.	,	
ur th	nsecured claim, list the creditor separately for each cl	alphabetical order of the creditor who holds each claim. If a creditor has more that aim. For each claim listed, identify what type of claim it is. Do not list claims already increditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
			Total claim
4.1	Cashwell Consumer Loans	Last 4 digits of account number	\$2,202.43
	Nonpriority Creditor's Name 636 Rembert C. Dennis Blvd Suite E	When was the debt incurred?	
	Moncks Corner, SC 29461 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	☐ Yes	Other. Specify	_

Official Form 106 E/F

Debtor 1 Emma Cleveland Pou

Case number (if know)

16-03463

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	27,289.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	27,289.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	2,202.43
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	2,202.43

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Fill in this infor	mation to identify your	case:		
Debtor 1	Emma Cleveland	Pou		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA	
Case number	16-03463			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	Oity		Olate	Zii Oddc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ity		Ciaio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Ducume	ni raye 20 01	3 <i>1</i>	
Fill in this	information to identify your	case:	V		
Debtor 1	Emma Cleveland	Pou			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
0	han 40 00 400				
Case num (if known)	ber <u>16-03463</u>				☐ Check if this is an
					amended filing
Officia	Form 106				
	I Form 106H	alatana			
Sched	lule H: Your Cod	ebtors			12/15
1. Do No Yes 2. Witt Arizon No. Yes 3. In Col in line Form	you have any codebtors? (If you have any codebtors? (If you have any codebtors? (If you have any codebtors, have you have any color and the last 8 years, have you have any color and the last 8 years, have you have any color and the last 8 years, have you have any color and the last 8 years, have you have any color and the last 8 years, have you have yo	Answer every question you are filing a joint case, lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	do not list either spouse as coperty state or territory? erto Rico, Texas, Washing with you at the time? spouse as a codebtor if tor or cosigner. Make su	s a codebtor. (Community proper gton, and Wisconsin.) your spouse is filing you have listed to	
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt
:	Caroline Cleveland 283 Westend Drive Moncks Corner, SC 29461			■ Schedule D, I □ Schedule E/F □ Schedule G _ CitiFinancial Se	ine <u>2.1</u> , line
:	Caroline Cleveland 283 Westend Drive Moncks Corner, SC 29461			■ Schedule D, I □ Schedule E/F □ Schedule G _ CitiFinancial Se	, line

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Fill	in this information	n to identify your ca	ase:									
Del	btor 1	Emma Cleve	land Pou									
	btor 2 buse, if filing)						_					
Uni	ited States Bankr	uptcy Court for the	DISTRICT OF SOUTH	I CAROL	NA							
Cas	se number 1	6-03463						Check if	f this is:			
(If kr	nown)							☐ An a		-		
											g postpetition llowing date	
0	fficial Forr	<u>n 106l</u>						MM	/ DD/ Y	YYY		
S	chedule I	: Your Inco	ome									12/15
sup spo atta	plying correct ir use. If you are s ch a separate sh	nformation. If you eparated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly th you, d	, and your spo o not include	ouse i inforr	s livii natio	ng with yo n about yo	ou, inclu our spo	ide inform use. If mo	nation about ore space is	t your needed,
1.	Fill in your em information.	ployment		Debtor	1			D	ebtor 2	or non-fil	ing spouse	
		re than one job,		■ Emp	■ Employed] Emplo	yed		
	attach a separa information abo		Employment status*	☐ Not	employed				Not en	nployed		
	employers.		Occupation	Utility	Worker							
	Include part-tim self-employed v	ne, seasonal, or work.	Employer's name	PPM I	nc.							
	Occupation ma or homemaker,	y include student if it applies.	Employer's address		6 Main St ry Hill, SC 29	593						
			How long employed th	nere?	16 years 5 *See Attach			Additional	Employ	ment Info	ormation	
Pai	rt 2: Give I	Details About Mon	thly Income									
	imate monthly in use unless you ar		ate you file this form. If y	ou have	nothing to repo	ort for a	any lii	ne, write \$0	0 in the	space. Inc	lude your no	n-filing
		ng spouse have mo separate sheet to	ore than one employer, co this form.	mbine the	e information fo	or all e	mplo	yers for tha	at persoi	n on the lir	nes below. If	you need
								For Debto	or 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthly			2.	\$_	2,03	36.67	\$	N/A	-
3.	Estimate and I	list monthly overti	me pay.			3.	+\$_		0.00	+\$	N/A	-
4.	Calculate gros	ss Income. Add lin	ne 2 + line 3.			4.	\$_	2,036.	.67	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Emma Cleveland Pou	-	(Case r	number (if k	nown)	16-03	463		
						Debtor 1		non-f	ebtor filing s	pouse	
	Cop	by line 4 here	4.		\$	2,030	6.67	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	147	7.55	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f		\$		0.20	\$		N/A	
	5g.	Union dues	5g		_{\$} —		0.00	\$ 		N/A N/A	_
	5h.	Other deductions. Specify:		و. ۱.+	\$ —			+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$		7.75	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,778		\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									_
		monthly net income.	88		\$		0.00	\$		N/A	_
	8b.	Interest and dividends	8b	Ο.	\$	(0.00	\$		N/A	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C .	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	80		<u>*</u> —		0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f		\$		0.00	\$		N/A	
	8g. 8h.	Other monthly income. Specify: Star Brands II	8g 48	ا. ۱.+	\$ _		0.00	*		N/A N/A	_
	011.	Ottal Brands II	_ "		Ψ <u> </u>	700		`		14/	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	<u> </u>	700	0.00	\$		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,478.92	+ \$		N/A	= \$	2,478.92
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe			•		•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	2,478.92
13.	Do	you expect an increase or decrease within the year after you file this form	?						ι	Combi month	ined ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

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Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463	Case number (<i>if known</i>) 16-03463
---	---

Official Form B 6l Attachment for Additional Employment Information

Debtor	
Occupation	Prep cook
Name of Employer	Star Brands II
How long employed	Since February 2016
Address of Employer	105 Sandshell Drive
	Charleston, SC 29492

Official Form 106I Schedule I: Your Income page 3

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Fill	in this informa	tion to identify yo	our case:					
Deb		Emma Cleve		1		Chec	k if this is:	
						_	An amended filing	
	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: DISTRI	CT OF SOUTH CAROLINA	Α	Ī	MM / DD / YYYY	
	e number 16	6-03463						
		rm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Part		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a sonar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid?				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
0	D							☐ Yes
3.	expenses of	enses include f people other t d your depende	han $_{\square}$	No Yes				
Part	t 2: Estim	ate Your Ongoi	ng Monthl	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
the	ude expense value of such icial Form 10	n assistance an	non-cash d have inc	government assistance i cluded it on <i>Schedule I:</i> Y	f you know Your Income		Your exp	enses
(011	iciai i oi iii io	,oi.,						
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		300.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's	-			4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5.		owner's associati nortgage paym		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
			· · · · · · · · · · · · · · · · ·		594, 104110	σ. ψ		0.00

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Debtor 1 E	mma Cleveland Pou	Case num	ber (if known)	16-03463
. Utilities	:			
6a. El	ectricity, heat, natural gas	6a.	\$	125.00
6b. W	ater, sewer, garbage collection	6b.	\$	0.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	40.00
6d. O	ther. Specify:	6d.	\$	0.00
. Food ar	nd housekeeping supplies	7.	\$	400.00
. Childca	re and children's education costs	8.	\$	0.00
Clothing	g, laundry, and dry cleaning	9.	\$	75.00
0. Persona	al care products and services	10.	\$	40.00
1. Medical	and dental expenses	11.	\$	50.00
2. Transpo	ortation. Include gas, maintenance, bus or train fare.			
	nclude car payments.	12.	\$	250.00
3. Entertai	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
. Charital	ole contributions and religious donations	14.	\$	100.00
5. Insuran	ce.			
	nclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Li	fe insurance	15a.		0.00
15b. H	ealth insurance	15b.	\$	0.00
	ehicle insurance	15c.	\$	143.00
15d. O	ther insurance. Specify:	15d.	\$	0.00
6. Taxes. [Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	Property taxes vehicle	16.	\$	20.00
7. Installm	ent or lease payments:			
17a. C	ar payments for Vehicle 1	17a.	\$	0.00
17b. C	ar payments for Vehicle 2	17b.	\$	0.00
17c. O	ther. Specify:	17c.	\$	0.00
17d. O	ther. Specify:	17d.	\$	0.00
3. Your pa	yments of alimony, maintenance, and support that you did not report as			
deducte	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other p	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or on Scheo			
20a. M	ortgages on other property	20a.	·	0.00
20b. R	eal estate taxes	20b.	\$	0.00
20c. Pi	operty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. M	aintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	omeowner's association or condominium dues	20e.	\$	0.00
. Other: S	Specify:	21.	+\$	0.00
	· · ·			
	te your monthly expenses			
	d lines 4 through 21.		\$	1,583.00
22b. Co _l	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	1,583.00
0-1	to come monthly mothing a ma			-
	te your monthly net income.	00-	Φ.	0.470.00
	opy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,478.92
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	1,583.00
00 -				
	ubtract your monthly expenses from your monthly income.	23c.	\$	895.92
11	ne result is your monthly net income.	200.		333.32
For exam modificati	expect an increase or decrease in your expenses within the year after you ple, do you expect to finish paying for your car loan within the year or do you expect your on to the terms of your mortgage?			ease or decrease because of a
■ No.	- · · ·			
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify you	case.			
Debtor 1	Emma Cleveland	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	H CAROLINA		
	16-03463				
(if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
Declara	tion About	an Individua	I Debtor's	Schedules	12/15
					.2.13
If two married p	eople are filing togeth	er, both are equally resp	oonsible for supplying	correct information.	
obtaining mone		in connection with a ba			atement, concealing property, or 000, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay som	eone who is NOT an att	orney to help you fill o	out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ankruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
				Declaration	on, and Signature (Official Foffit 119)
•	alty of perjury, I declare	e that I have read the su	mmary and schedules	s filed with this declara	tion and

Official Form 106Dec

Signature of Debtor 2

Date

X /s/ Emma Cleveland Pou

Emma Cleveland Pou Signature of Debtor 1

Date July 22, 2016

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		nation to identify you				
Deb	otor 1	Emma Cleveland	Middle Name	Last Name		
	otor 2	First Name	Middle Nove	Lost Nama		
` '	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	hkruptcy Court for the:	DISTRICT OF SOUTH CA	AROLINA		
Cas (if kn		6-03463				Check if this is an amended filing
	ficial For		Affairs for Individ	duals Filing for E	Bankruptcy	4/10
infor num Par	mation. If mober (if known	ore space is needed, i). Answer every que	arital Status and Where You	this form. On the top of an		
	■ Married□ Not married	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
		t all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	217 Pou Co Moncks Co	ourt orner, SC 29461	From-To: February 2010 April 2016	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	■ No □ Yes. Ma	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ner hedule H: Your Codebtors (Of ar Income	vada, New Mexico, Puerto R		
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part	t-time activities.	endar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,315.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1	Emma Cleveland Pou	Documen	t Page 28 of 37	number (if known) 16-03463	ssc Main
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar year: y 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$42,079.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	calendar year before that: y 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$47,242.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
■ □	each source and the gross income No Yes. Fill in the details.		,	,	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3:	List Certain Payments You	ı Made Before You Filed for I	Bankruntcv		
	either Debtor 1's or Debtor 2 No. Neither Debtor 1 nor I individual primarily for a During the 90 days before No. Go to line 2 Yes List below paid that continclude * Subject to adjustments.	2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or household pre you filed for bankruptcy, die 7. each creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years	r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,425* or more in tts for domestic support obligations bankruptcy case. Is after that for cases filed on o	of \$6,425* or more? n one or more payments and tations, such as child support a	he total amount you and alimony. Also, do
•		or both have primarily consu ore you filed for bankruptcy, di		of \$600 or more?	

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid

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7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% or	eral partners; partne more of their voting	rships of which y securities; and	ou are a genera any managing a	al partner; corporations agent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on	account of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number	Nature of the case	Court or agency	, ,	Status of th	·
	CitiFinancial Servicing LLC, vs. Emma Cleveland; Carolyn N. Cleveland a/k/a Carolyn A. Cleveland 2012-CP-08-00532	Foreclosure	Berkeley County Court of Common Pleas Moncks Corner, SC 29461		☐ Pending ☐ On appeal ■ Concluded Dismissed	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garn	ished, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	•	Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.	otcy, did any creditor, incl		ancial institutio	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	e action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possessi			efit of creditors, a

Debtor 1 Emma Cleveland Pou

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Dal	otor 1	France Classeland Bass	L	ocument	Page 30		or (%) (
Dei	otor 1	Emma Cleveland Pou				Case number	er (if known) 16-03463	
Pai	rt 5:	List Certain Gifts and Contributions						_
13.	Withi	n 2 years before you filed for bankrup	otcy, d	id you give any g	gifts with a tot	al value of more	than \$600 per person	?
		No						
		Yes. Fill in the details for each gift.						
		with a total value of more than \$600		Describe the gi	fts		Dates you gave	Value
	per p	person					the gifts	
	Pers Add	on to Whom You Gave the Gift and						
14.	_	n 2 years before you filed for bankru p No	otcy, d	lid you give any o	gifts or contrib	outions with a to	tal value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or cor	ntributi	on				
		s or contributions to charities that tot		Describe what	vou contribute	ed.	Dates you	Value
	more	e than \$600	.ui	Describe What	you commodit	Ju	contributed	Vulue
		rity's Name ress (Number, Street, City, State and ZIP Code)						
		nal United Methodist Church		Debtor contri	butes approx	ximately \$100	Throughout	Undetermined
				monthly		, +	the past 2	
							years	
Pai	rt 6:	List Certain Losses						
15.		n 1 year before you filed for bankrupt	tcy or	since you filed fo	or bankruptcy,	did you lose an	ything because of thef	t, fire, other disaster,
	or ga	mbling?						
		No						
		Yes. Fill in the details.						
	Desc	cribe the property you lost and	Descri	oe any insurance	coverage for	the loss	Date of your	Value of property
	how			the amount that in		, ,	loss	lost
		ir	nsuran	ce claims on line :	33 of Schedule	A/B: Property.		
Pai	rt 7:	List Certain Payments or Transfers						
16.	Withi	n 1 year before you filed for bankrupt	tcv. di	d vou or anvone	else acting on	vour behalf pay	or transfer any prope	rty to anyone you
	consi	ulted about seeking bankruptcy or pr	eparin	g a bankruptcy p	etition?		, , ,	is, is unifolia you
	Includ	le any attorneys, bankruptcy petition pre	eparers	s, or credit counse	ling agencies for	or services requir	red in your bankruptcy.	
		No						
		Yes. Fill in the details.						
	Pers	on Who Was Paid		Description and	d value of any	property	Date payment	Amount of
	Addı	ress il or website address		transferred			or transfer was made	payment
		on Who Made the Payment, if Not Yo	u				maue	
	Dros	se Law Firm		\$300			May 19, 2016	\$1,200.00
		Faber Place Drive, Suite 103		\$300			May 25, 2016	
		th Charleston, SC 29405 se@droselaw.com		\$250 plus \$60 costs	towards fili	ng tee and	June 9, 2016 June 23, 2016	
	uios	se edi Oseiaw.com		\$290 towards	filing fee an	d costs	Julie 23, 2010	
17.	Withi	n 1 year before you filed for bankrupt	tcy, di	d you or anyone	else acting on	your behalf pay	or transfer any prope	rty to anyone who
	prom	ised to help you deal with your credit	tors o	to make paymer	nts to your cre	editors?		
	טט מט	ot include any payment or transfer that ye	ou liste	eu on line 16.				
		No						
		Yes. Fill in the details.						
		on Who Was Paid		Description and	d value of any	property	Date payment	Amount of
	Addı	ress		transferred			or transfer was	payment

made

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Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463

18.	tran Inclu	hin 2 years before you filed for bankrupt asferred in the ordinary course of your be ude both outright transfers and transfers me ude gifts and transfers that you have alread No Yes, Fill in the details.	usino ade a	ess or financial aff is security (such as	fairs? the granting of a			•			
	Pei	rson Who Received Transfer dress		Description and property transfer		pay	cribe any property or ments received or debts d in exchange	Date t	transfer was		
	Pei	rson's relationship to you				·	J				
19.		hin 10 years before you filed for bankrupeficiary? (These are often called asset-pro			ny property to a	ı self-sett	tled trust or similar device	of whicl	h you are a		
		Yes. Fill in the details.									
	Na	me of trust		Description and	value of the pro	perty tra	nsferred	Date 1 made	Transfer was		
Par	t 8:	List of Certain Financial Accounts, In	strun	nents, Safe Depos	it Boxes, and S	torage Uı	nits				
20.	solo	hin 1 year before you filed for bankrupto d, moved, or transferred?	•	•							
		ude checking, savings, money market, ones, pension funds, cooperatives, asso					sit; shares in banks, credit	unions	i, brokerage		
	_										
	_	me of Financial Institution and	Las	at 4 digits of	Type of acco	unt or	Date account was		Last balance		
	Ad	dress (Number, Street, City, State and ZIP le)	acc	ount number	instrument		closed, sold, moved, or transferred	befo	ore closing or transfer		
21.		you now have, or did you have within 1 h, or other valuables?	year	before you filed fo	r bankruptcy, a	ny safe d	leposit box or other deposi	tory for	· securities,		
		No Yes. Fill in the details.									
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describ	e the contents		you still /e it?		
22.	Hav	re you stored property in a storage unit	or pla	ace other than you	r home within 1	year bef	fore you filed for bankrupto	y?			
		No Yes. Fill in the details.									
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describ	e the contents		you still ve it?		
Par	t 9:	Identify Property You Hold or Control	for S	Someone Else							
23.	Doy	you hold or control any property that so someone.			lude any propei	rty you bo	orrowed from, are storing f	or, or h	old in trust		
	IOI :	No									
		Yes. Fill in the details.									
		ner's Name dress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Describ	e the property		Value		
Par	t 10:	Give Details About Environmental Inf	orma	tion							
For	the p	ourpose of Part 10, the following definiti	ons a	apply:							
	Env	vironmental law means any federal, state	e, or I	ocal statute or reg	julation conceri	ning pollu	ution, contamination, releas	ses of h	nazardous or		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Case number (if known) 16-03463 **Emma Cleveland Pou**

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? П Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business

27.	. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity, eith	ner full-time or part-time			
	☐ A member of a limited liability com	pany (LLC) or limited liability partnership (l	LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing e	xecutive of a corporation				
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation				
	No. None of the above applies. Go to	Part 12.				
	☐ Yes. Check all that apply above and fi	II in the details below for each business.				
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.			
	(Number, Orlect, Only, State and Em Gode)	Name of accountant of bookkeeper	Dates business existed			

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code) **Date Issued**

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-03463-jw Doc 9 Filed 07/22/16 Entered 07/22/16 11:14:22 Desc Main Document Page 33 of 37

Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463

Fill in this inform	nation to identify your case:
Debtor 1	Emma Cleveland Pou
Debtor 2 (Spouse, if filing)	
United States E	ankruptcy Court for the: District of South Carolina
Case number (if known)	16-03463

Che	k as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	2,663.30	\$	0.00
Alimony and maintenance payments. Do not include Column B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Includ old, your spouse o	le regula depende	contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from rental or other real property	•	0.00	Copy here ->	Φ.	0.00	\$	0.00

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16-03463

Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 2,663.30 0.00 2,663.30 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 2.663.30 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 2,663.30 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 2.663.30 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12 31,959.60 15b. The result is your current monthly income for the year for this part of the form.

Emma Cleveland Pou

Debtor 1

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Debt	or 1	Emm	a Cleveland Pou			Case number (if known)	16-03463		
16	. Cal	culate t	he median family income that applies to	you. F	ollow these ste	eps:			
	16a	. Fill in t	the state in which you live.		sc				
	16h	Fill in t	the number of people in your household.		1				
			the median family income for your state and	size of				\$	42,040.00
		To find	d a list of applicable median income amount ctions for this form. This list may also be ava	ts, go o	nline using the			Ψ	<u> </u>
17	. Hov		e lines compare?	allable a	at the bankiup	icy cierk's office.			
	17a	•	Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do						
	17b		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14	ulation					
Par	t 3:	Calc	culate Your Commitment Period Under 11	U.S.C	. § 1325(b)(4)				
18.	Cop	y your	total average monthly income from line	11				\$	2,663.30
19.	cont	end tha	e marital adjustment if it applies. If you are at calculating the commitment period under come, copy the amount from line 13.						
			marital adjustment does not apply, fill in 0 or	n line 19	9a.		-:	\$	0.00
	19b	Subtra	act line 19a from line 18.					\$	2,663.30
00	٠.								
20.		_	our current monthly income for the year					æ	2,663.30
	20a		line 19b					Φ	
		wuitip	ly by 12 (the number of months in a year).					X	12
	20b	. The re	esult is your current monthly income for the	year for	this part of th	e form		\$	31,959.60
					·				
	20c.	Copy t	the median family income for your state and	size of	f household fro	om line 16c		\$	42,040.00
	21	Нож с	do the lines compare?						
	۷۱.	_	·						
			ine 20b is less than line 20c. Unless otherw neriod is 3 years. Go to Part 4.	ise ord	ered by the co	urt, on the top of page 1 of this	s form, check b	юх 3, Т	he commitment
			ine 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless o	therwise order	red by the court, on the top of p	page 1 of this f	orm, ch	eck box 4, The
Par	t 4:	Sign	n Below						
	By s	igning I	here, under penalty of perjury I declare that	the info	ormation on thi	s statement and in any attachr	ments is true a	nd corre	ect.
)			a Cleveland Pou						
			leveland Pou of Debtor 1						
		July	22, 2016						
		MM /	DD / YYYY						
	•		ked 17a, do NOT fill out or file Form 122C-2		m Online 20	of that form convivour ourrest	monthly incom	no from	lino 14 abovo
	ıı yo	u criech	ked 17b, fill out Form 122C-2 and file it with	1112 IOL	m. On line 39	or macronn, copy your current	THORIGINY INCOM	TE HOIII	iiile 14 above.

Debtor 1 Emma Cleveland Pou Case number (if known) 16-03463

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2016 to 06/30/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **PPM**, **Inc.**

Income by Month:

6 Months Ago:	01/2016	\$1,786.00
5 Months Ago:	02/2016	\$1,880.00
4 Months Ago:	03/2016	\$2,256.00
3 Months Ago:	04/2016	\$2,226.63
2 Months Ago:	05/2016	\$1,850.63
Last Month:	06/2016	\$1,721.38
	Average per month:	\$1,953.44

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Star Brands II

Income by Month:

6 Months Ago:	01/2016	\$0.00
5 Months Ago:	02/2016	\$105.27
4 Months Ago:	03/2016	\$993.81
3 Months Ago:	04/2016	\$1,357.03
2 Months Ago:	05/2016	\$925.16
Last Month:	06/2016	\$877.87
	Average per month:	\$709.86